PETraner	nittal of Payment of Issue Fee	Docket Number					
(189	initial of Fayinonic of 100do Fee	LVIP:111US					
0 3 2008							
In Re O oplicatio	n Of: Heinz PLANK						
ADEMA							
Application No.	10/784,461						
Filing Date	February 23, 2004						
Examiner	BUI, Luan Kim						
Art Unit							
	Title of Invention						
TRANSPORT COM	NTAINER FOR SLIDES FOR IMMUNOLOGICAL LABELING FOR THIN	TISSUE SECTIONS					
	COMMISSIONER FOR PATENTS:						
_							
Transmitted h	nerewith are the following for the above-identified application.						
X Issue	Fee Transmittal Form PTOL-85						
X issue	Fee Transmittal Form PTOL-65						
Utility	Fee Design Fee	Plant Fee					
:							
X Public	cation Fee						
Fees Calcula	tad below:						
r ees Calcula	wed below.						
	Fee Calculation	_					
	Issue Fee (from abo	ve) \$1440					
	Publication Fee (from abo	ve) \$300					
Applicant clai	ms small entity status. See 37 CFR 1.27.	AL \$1740					
<u> </u>	Method of Payment						
X Deposit Acco							
Deposit Account	1	Albania all Albania					
	identified deposit account, the Director is hereby authorized to	: (cneck all that apply)					
Charge the fee(s) set forth above Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
) indicated above, except for the filing fee						
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	Amount Grand						

Transmittal of Payment of Issue Fee

Docket Number

LVIP:111US

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(Typed or Printed Name of Person Mailing Correspondence) (Signature of Person Mailing Correspondence)		Certificate of Transmission I hereby certify that this Associate Power of Attorney and accompanying documents are being facsimile transmitted to the United States Patent and Trademark Office on the date indicated below:				
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Select the name of the person who will electronically sign the application from the drop-down box below.

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Name	Robert C. Atkinson		Robert C. Atkinson Registration Numb		nber	per 57,584	
Signatory Capacity	Attorney for Applicant(s)	E-mail Address	ratkinson@ideal	awyers.com			
eSign	Af Can			Date Signed	7-1-08		

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to : Mail Mail Stop ISSUE FEE

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SIMPSON & SIMPSON, PLLC 5555 Main Street Williamsville, New York 14221

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Robert & Atkinson	(Depositor's name)
A Clara	(Signature)
July 1, 2008	(Date)

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO.

10/784,461 February 23, 2004 Heinz PLANK LVIP:111US 8252

TITLE OF INVENTION:

TRANSPORT CONTAINER FOR SLIDES FOR IMMUNOLOGICAL LABELING FOR THIN TISSUE SECTIONS

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APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE PUBLICATION FEE		TOTAL FEE(S) DUE		DATE DUE		
nonprovisional	NO	\$1440		\$300	147/147/	\$1740 2008 NNGUYE	NP AAAAAA	07/24/2 19 10784	
EXAMINER		ART UN	VIT TIN	CLASS-SUBCLASS		4564			
BUI, Luan Kim		3728		206-456000	85 FC:	1504			440.00 OP 300.00 OP
1. Change of correspondence CFR 1.363).	address or indication of "Fee A	Address" (37		ng on the patent front pag		ttomevs or	SIMPSON	N & SIMI	PSON, PLLC
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
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PLEASE NOTE: Unless a forth in 37 CFR 3.11. Con	n assignee is identified below, r apletion of this form is NOT a s	o assignee data will a ubstitute for filing an	ppear on the pa assignment.	tent. If an assignee is ider	ntified be	low, the docume	ent has been file	ed for reco	dation as set
(A) NAME OF ASSIGNE	E		(B) RESIDEN	CE: (CITY and STATE C	OR COU	NTRY)			
LEICA MIKROSYSTEME GMBH			Vienna, AUSTRIA						
Please check the appropriate	assignce category or categories	(will not be printed o	on the patent):	☐ Individual	X c	orporation or otl	ner private grou	ip entity	Government
4a. The following fee(s) are	enclosed:		4b. Payment o	` '					
Issue Fee			A check in the amount of the fee(s) is enclosed.						
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Advance Order - # o	f Copies			irector is hereby authorize count Number <u>50-0822</u>		rge the required	fee(s), or credit (enclose an ex		
5. Change in Entity Status	(from status indicated above)							,	
	SMALL ENTITY status. See 37	_		ant is no longer claiming					
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Authorized Signature	A Ca	w)		Date:	July	1, 2008			
Typed or printed name Robert C. Atkinson			Registration No. 57,584						

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